

Wisconsin Unique Well Number 	<input type="checkbox"/> Add	<input type="checkbox"/> Change	
Inventory Completed By (Last Name, First, MI) 	Date / / 	With 	<input type="checkbox"/> DNR <input type="checkbox"/> _____
		m m d d y y y y	

Facility
Name _____

Facility ID # _____

Local Well ID _____

High Cap Well # _____

Primary Contact Name (Last, First, MI) _____

Telephone Number _____

() _____

Mailing Address _____

City _____

State _____

Zip Code _____

☐ Owner☐ Driller☐ Operator☐ Business☐ Occupant☐ Facility☐ Consultant☐ Sampler☐ Manager☐ Other☐ Contractor

Other Contact Name (Last, First, MI) _____

Telephone Number _____

() _____

Mailing Address _____

City _____

State _____

Zip Code _____

☐ Owner☐ Driller☐ Operator☐ Business☐ Occupant☐ Facility☐ Consultant☐ Sampler☐ Manager☐ Other☐ Contractor**Well Location**☐ Town ☐ City ☐ Village

Fire # (If avail.) _____

County _____

Grid or Street Address or Road (If avail.) _____

Govt. Lot # _____

OR

____ 1/4 of ____ 1/4 of Section _____

Subdivision Name _____

Lot _____

Block _____

T _____; R _____ ☐ E ☐ W

Construction Type

☐ Drilled☐ Dug☐ Driven Point☐ Spring☐ Jetted☐ Other

OR

Latitude

Deg.

Min.

Sec.

Longitude

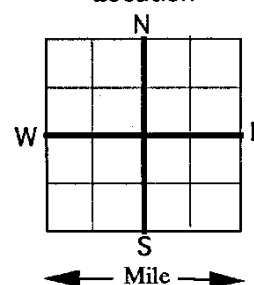
Land Surface

Elevation _____ ft. MSL

Number of Wells on Property _____

(X) 1/4 1/4 Sec.

Location



Construction Date

 / /

m m d d y y y y

Constructor _____

Well Use

☐ Private Potable☐ Community-Municipal☐ Priv. Non-Potable☐ Community OTM☐ Monitoring Well☐ Non Transient Non-Com.☐ Transient Non-Com.

Source of Well Data

☐ Well Report☐ Owner/Occupant☐ Other*

Well Status

☐ Active Use

Depth From Land Surface To:

Bedrock _____ ft.

Well Bottom _____ ft.

Static Water _____ ft.

Casing Bottom _____ ft.

Casing Diameter

_____ in.

Water Bearing Formation

☐ Unconsolidated☐ Sandstone☐ Limestone☐ Shale☐ Crystalline☐ Inactive☐ Perm Filled

Comments: eg. reason for inventory, samples taken, directions to property, details of well location on property, collected before or after water softener. _____

*For "Other", enter a description in the comment area if needed.

Groundwater Monitoring Inventory Form 3300-67
Instructions

1. All wells sampled by DNR employees must be inventoried and assigned a Wisconsin Unique Well ID in the Departments data system. Use this form to create a new inventory record or to change an existing record for a well. Use a separate form for each well.
2. Mandatory fields are indicated by shadowing and **MUST** be completed or your form will not be entered into the computer system. Fill in all applicable portions of the form as completely as possible.
3. If the well is being inventoried for the first time, check the "add" box in the upper right corner of the form. If there is a change to existing information, check the "change" box in the upper right corner and then fill in the Wisconsin Unique Well Number and **ONLY THE INFORMATION THAT NEEDS TO BE CHANGED**. If the form is filled out by DNR staff, check the DNR box. If the person completing this inventory form is associated with another agency; fill in the agency acronym letters.
4. For a private well, the primary contact should be the well owner or the resident occupant of the property served by the well, if the owner or occupant is known.
5. Check only **ONE** contact type code box for each contact name. Check the one that is the most relevant if more than one applies. If the well owner is the occupant, check "Owner" as the contact type. Check the facility or business box **ONLY** if there is not person to contact.
6. Wells should be located as precisely as possible. If the well is located by Public Land Survey, record the T, R, S, 1/4 and 1/4 1/4 section. If the well is located by latitude and longitude, record the location to the nearest second. If the well is located in a government lot, record the latitude and longitude as well as the government lot number.
7. Check only **ONE** box in the Well Use section. If a spring is being inventoried, check Spring under Construction Type in addition to the well use box.
8. County Codes and Names:

1. Adams	19. Florence	37. Marathon	55. Rusk
2. Ashland	20. Fond Du Lac	38. Marinette	56. St. Croix
3. Barron	21. Forest	39. Marquette	57. Sauk
4. Bayfield	22. Grant	40. Menominee	58. Sawyer
5. Brown	23. Green	41. Milwaukee	59. Shawano
6. Buffalo	24. Green Lake	42. Monroe	60. Sheboygan
7. Burnett	25. Iowa	43. Oconto	61. Taylor
8. Calumet	26. Iron	44. Oneida	62. Trempealeau
9. Chippewa	27. Jackson	45. Outagamie	63. Vernon
10. Clark	28. Jefferson	46. Ozaukee	64. Vilas
11. Columbia	29. Juneau	47. Pepin	65. Walworth
12. Crawford	30. Kenosha	48. Pierce	66. Washburn
13. Dane	31. Kewaunee	49. Polk	67. Washington
14. Dodge	32. La Crosse	50. Portage	68. Waukesha
15. Door	33. Lafayette	51. Price	69. Waupaca
16. Douglas	34. Langlade	52. Racine	70. Waushara
17. Dunn	35. Lincoln	53. Richland	71. Winnebago
18. Eau Claire	36. Manitowoc	54. Rock	72. Wood
9. Return this form to the DNR Bureau of Water Supply, Box 7921, Madison, WI 53707, unless you are part of a special sampling program and have been instructed to return the form elsewhere.